IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

SCS-124-1158 Atty

2814 Examiner: M. Ghazzawi

Dkt.

TC/A.U.

C# M#

Date: September 13, 2007

PHILLIPS et al.

Serial No. 10/577,938

Filed:

May 3, 2006

STRAINED SEMICONDUCTOR DEVICES

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Title:

## RESPONSE/AMENDMENT/LETTER

This is a response/amendment/letter in the above-identified application and includes an attachment which is hereby incorporated by reference and the signature below serves as the signature to the attachment in the absence of any other signature thereon.

## ☐ Correspondence Address Indication Form Attached.

## Fees are attached as calculated below:

Total effective claims after amendment

15 minus highest number

previously paid for

20

(at least 20) =x \$50.00 \$0.00 (1202)/\$0.00 (2202) \$

Independent claims after amendment

previously paid for 3 (at least 3) =

x \$200.00

minus highest number

\$0.00 (1201)/\$0.00 (2201) \$

If proper multiple dependent claims now added for first time, (ignore improper); add

\$360.00 (1203)/\$180.00 (2203) \$

Petition is hereby made to extend the current due date so as to cover the filing date of this

paper and attachment(s)

One Month Extension \$120.00 (1251)/\$60.00 (2251)

Two Month Extensions \$450.00 (1252)/\$225.00 (2252)

Three Month Extensions \$1020.00 (1253/\$510.00 (2253)

Four Month Extensions \$1590.00 (1254/\$795.00 (2254)

Five Month Extensions \$2160.00 (1255/\$1080.00 (2255) \$ 1020.00

Terminal disclaimer enclosed, add

\$130.00 (1814)/ \$65.00 (2814)

Applicant claims "small entity" status. □ Statement filed herewith

Rule 56 Information Disclosure Statement Filing Fee

\$180.00 (1806)

Assignment Recording Fee

\$40.00 (8021) 0.00 \$

Other:

0.00 **TOTAL FEE \$ 1020.00** 

0.00

## CREDIT CARD PAYMENT FORM ATTACHED.

The Commissioner is hereby authorized to charge any deficiency, or credit any overpayment, in the fee(s) filed, or asserted to be filed, or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Account No. 14-1140. A duplicate copy of this sheet is attached.

901 North Glebe Road, 11th Floor Arlington, Virginia 22203-1808 Telephone: (703) 816-4000

Facsimile: (703) 816-4100 SCS:kmm

NIXON & VANDERHYE9PX \$2007 JADDO1 By Atty: Stanley C. Spooner Reg/No. 27/393

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Signature:

1020.00 OP